



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

Under the Paperwork Reduction Act of 1995, no person are required to provide information to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/047,022-Conf. #005712
TOTAL AMOUNT OF PAYMENT		Filing Date	January 17, 2002
(\$) 400.00		First Named Inventor	Takeyoshi ITO
		Examiner Name	K. M. Gagliostro
		Art Unit	2615
		Attorney Docket No.	0879-0371P

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☐ Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
33	- 29 = 4	x 50.00 =	200.00	Fee (\$)
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee Paid (\$)
5	- 4 = 1	x 200.00 =	200.00	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50	(round up to a whole number) x	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY		Registration No.		Telephone	
Signature		39,491		(703) 205-8000	
Name (Print/Type) Michael R. Cammarata		Date		May 30, 2006	



MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

AMENDMENT TRANSMITTAL LETTER				Docket No. 0879-0371P	
Application No. 10/047,022-Conf. #5712	Filing Date January 17, 2002	Examiner K. M. Gagliostro	Art Unit 2615		
Applicant(s): Takeyoshi ITO					
Invention: DIGITAL CAMERA					
MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	33	- 29 =	4	50.00	200.00
Independent Claims	5	- 4 =	1	200.00	200.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					400.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ <u>400.00</u> is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Michael R. Cammarata Attorney Reg. No.: 39,491				Dated: <u>May 30, 2006</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					



MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

Appl No: 10/047,022
Attorney Docket: 0879-0371P

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: T. Ito Conf.: 5712
Appl No: 10/047,022 Art Unit: 2615
Filed: January 17, 2002 Examiner: B. Jelinek
For: A DIGITAL CAMERA USING AN INDICATING DEVICE TO
INDICATE A PLURALITY OF FUNCTIONS

REPLY UNDER 37 C.F.R. § 1.116

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In reply to the Examiner's Final Office Action dated February 27, 2006, the following amendments and remarks are respectfully submitted in connection with the above-identified application as follows:

- Amendments to the claims;
- Remarks/Arguments.

05/31/2006 JADD01 00000000 10047022

01 FC:1201
02 FC:1202

200.00 OP
200.00 OP